

# COVID-19 and Health and Safety in Child Care

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The North Carolina Child Care Health and Safety Resource Center

April 2020



# The NC Resource Center

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## **Mission:**

To promote healthy and safe indoor and outdoor environments for children in early care and education settings through child care health consultation.



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# Who are Child Care Health Consultants?



CCHCs are trained health professionals with education and experience in both child and community health and early care and education



Qualified CCHCs have completed the NC Child Care Health Consultant Training Course



CCHCs work with programs to assess, plan, implement, and evaluate strategies to achieve high quality, safe, healthy child care environments



CCHC promote healthy and safe environments for children in child care settings



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# Find a CCHC during COVID-19 outbreak

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List of Child Care Health Consultants:

[healthychildcare.unc.edu/cchcs-during-covid-19](https://healthychildcare.unc.edu/cchcs-during-covid-19)

The NC Resource Center, the Division of Child Development and Early Education, the Division of Public Health, and the NC Partnership for Children, with local Partnerships for Children, have **increased coverage of Child Care Health Consultants (CCHCs)**



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# COVID-19 – What is known

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Spreads from person to person when an infected person:

- Is in close contact (within 6 feet for 10 minutes or more)
- Coughs or sneezes
- Contaminates a surface that another person touches

The virus doesn't move itself. People move the virus.



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# Symptoms

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- Some people will be symptom free
- About 80% will experience mild cold-like or flu-like symptoms
- About 20% will experience more serious symptoms such as:
  - Fever
  - Cough
  - Shortness of breath
- About 3.4% of those who contract COVID-19 will die.



# Children

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Children are more likely to have mild cold-like symptoms

- Fever
- Runny nose
- Cough

Vomiting and diarrhea have also been reported



# When to seek medical care

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If you are concerned, call your primary doctor before going to work

Avoid the Emergency Room unless you have severe symptoms such as:

- Shortness of breath
- Persistent chest pain or pressure
- Confusion
- Bluish lips and face



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# Quarantine or Isolation?

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Quarantine: Separation of a person who has been exposed but is without symptoms from the general public

- 14 days from **potential exposure**.

Isolation: Separation of a sick person from healthy people

- If **suspected of having or diagnosed with COVID-19**:
  - isolate until at least 7 days after the onset of symptoms **AND**
  - $\geq 72$  hours after symptom resolve (no fever without fever reducing medication and other symptoms improved) whichever is longer.



# Health Guidance for Facilities

Review: March 23 Interim Coronavirus Disease 2019 Guidance for Child Care Settings



NC DEPARTMENT OF  
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## **Interim Coronavirus Disease 2019 (COVID-19) Guidance for Child Care Settings**

Updated March 23, 2020

This guidance is intended to help child care facilities make informed decisions about COVID-19 and minimize the risk of exposure to both the staff and the children in their care. To reduce the likelihood of COVID-19 transmission in our community, K-12 public schools in North Carolina are closed [by order of the Governor](#) for at least two weeks, effective March 16, 2020. Child care centers and family child care homes have the option to remain open and provide a needed service for essential personnel. The same steps that a child care facility would take to prevent the spread of any other respiratory illness, such as flu, will also reduce the likelihood of COVID-19 transmission. Precautions that both staff and children should take include:

- Stay home when sick (e.g., fever, cough, shortness of breath, sore throat, diarrhea)
- Wash hands frequently with soap and water for at least 20 seconds (about as long as it takes to sing "Happy Birthday" twice). In addition to usual handwashing, make sure to wash hands:



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# Door signs:



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## Coronavirus (COVID-19) Information

EVERY PERSON ENTERING THE FACILITY MUST READ

To keep the staff, children, and the community safe, please **do not enter the building if:**

- ✓ You have tested positive for COVID-19
- ✓ You or anyone in your household have been tested for COVID-19
- ✓ You or anyone in your household think they could have COVID-19

...or if you or anyone in your household (including children) have these symptoms or have been in close contact with anyone with these symptoms:

- ✓ Fever
- ✓ Cough
- ✓ Shortness of breath
- ✓ Sore throat
- ✓ Diarrhea

If you have any of these symptoms, contact a health professional.

Be aware, **you are at higher risk** if you are:

- ✓ Age 65 years or older
- ✓ Pregnant (It is not yet known if pregnant women are high risk but pregnant women should protect themselves from all infectious diseases)

...or have any of these health conditions:

- ✓ Chronic illness such as lung disease or moderate to severe asthma
- ✓ Heart disease
- ✓ Immunocompromised, including those undergoing cancer treatment
- ✓ Severe obesity
- ✓ Diabetes
- ✓ Renal failure
- ✓ Liver disease

Staff concerned about being at risk should discuss with their supervisor.

### Daily Health Check

Staff will conduct a standard Daily Health Check on every child, every day and exclude if he/she:

- ✓ Has a temperature above 100.4, cough, shortness of breath, sore throat, or diarrhea
- ✓ Is unable to participate in activities as normal
- ✓ Needs more care than staff can provide without compromising the health and safety of other children

Staff will also check for signs of illness periodically throughout the day for:

- |                                   |  |
|-----------------------------------|--|
| ✓ Changes in behavior or mood     | ✓ Unusually warm skin                              |
| ✓ Looking different from normal   | ✓ Eating or drinking more or less than usual       |
| ✓ Complaining of not feeling well | ✓ Vomiting   |
| ✓ Pulling at ear(s)               | ✓ Having abnormal stools, diarrhea or unusual odor |
| ✓ Runny nose or eyes              | ✓ Not urinating                                    |
| ✓ Cough                           | ✓ Being off balance or walking unevenly            |

For COVID-19 information in North Carolina, call 2-1-1 or 888-892-1162.



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## Información sobre el coronavirus (COVID-19)

LECTURA OBLIGATORIA PARA TODOS LOS VISITANTES AL CENTRO

Para proteger al personal, a los niños y a la comunidad, **no entre al edificio si:**

- ✓ Ha dado positivo por el COVID-19
- ✓ Usted o alguien que vive con usted ha dado positivo por el COVID-19
- ✓ Usted o alguien que vive con usted piensa que puede tener el COVID-19

...o si usted o alguien que vive con usted (incluidos los niños) tienen estos síntomas o ha tenido contacto cercano con alguien que los tenga:

- ✓ Fiebre
- ✓ Tos
- ✓ Dificultad para respirar
- ✓ Dolor de garganta
- ✓ Diarrea

Si tiene alguno de estos síntomas, consulte con un profesional de la salud.

**Advertencia. Tiene un riesgo mayor si tiene:**  
Tiene un riesgo alto:

- ✓ Tiene 65 años o más
- ✓ Está embarazada (Todavía no se sabe si las mujeres embarazadas tienen un riesgo, pero deben protegerse contra todas las enfermedades infecciosas).

...o si tiene de estas enfermedades:

- ✓ Enfermedades crónicas como las de pulmón y el asma moderada o grave
- ✓ Enfermedades del corazón
- ✓ Está inmunocomprometido, por ejemplo si está recibiendo un tratamiento contra el cáncer
- ✓ Obesidad extrema
- ✓ Diabetes
- ✓ Fallo renal
- ✓ Enfermedades del hígado

El personal preocupado por estar en riesgo debe discutir con su supervisor.

### Chequeo de salud diario

El personal debe comprobar la salud de cada niño a diario y excluirle si:

- ✓ Tiene una temperatura de más de 100.4, tos, dificultad para respirar, dolor de garganta o diarrea
- ✓ No puede participar en las actividades normales
- ✓ Necesita más atención de la que el personal pueda darle sin poner en peligro la salud y la seguridad de los demás niños

El personal examinará a los niños al entrar y periódicamente a lo largo del día para detectar:

- |                                      |  |
|--------------------------------------|--|
| ✓ Cambios en la conducta o el ánimo  | ✓ Piel anormalmente cálida                           |
| ✓ Un aspecto distinto al normal      | ✓ Si come o bebe más o menos de lo normal            |
| ✓ Quejas de sentirse mal             | ✓ Vómitos  |
| ✓ Si el niño se jala las orejas      | ✓ Evacuaciones anormales, diarrea u olores inusuales |
| ✓ Secreciones en la nariz o los ojos | ✓ Si no orina  |
| ✓ Tos                                | ✓ Si pierde el equilibrio o camina tambaleándose     |

Para información sobre el COVID-19 en Carolina el Norte, llame al 2-1-1 o 888-892-1162.

# Drop off and pick up

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- Stagger drop off and pick up
- Only children and staff who are needed to maintain ratio should be in classrooms.
- Have parents drop off children outside the classroom. Staff should meet children as they are dropped off.
- Have someone posted at the entrance to talk to staff and families who are entering the building about their symptoms.
- Conduct a Daily Health Check - ask everyone if they have had a fever, cough, or shortness of breath.





# Daily Health Check



## Daily Health Check

Revised August 2018



### What is it?

The early educator performs a daily health check by observing each child when he/she enters the classroom and having a short conversation with the parent/guardian to see if they notice anything unusual.

It is a way for early educators to check for a change in a child's health and well-being. A daily health check helps early educators establish what is normal or abnormal for each child.

### Why do it?

To determine if a child appears or is behaving differently than usual.

The sooner sick children are identified, the sooner their health needs can be addressed. Early identification of illness in children can also reduce the spread of illness or disease.

### Who does it?

Early educators do a daily health check using a checklist. Child care health consultants can provide training on the daily health check for early educators.

The early educator should perform a daily health check in a relaxed and comfortable manner that respects the family's culture as well as the child's body and feelings.

### When to do it?

Early educators should perform a daily health check when a child first arrives at the child care facility and when the parent or guardian is still present. It can be repeated periodically throughout the day as necessary.

### How is it done?

Start by getting on the child's eye level, then:



**LOOK** – for signs and symptoms of illness.

- ✓ Changes in mood or behavior
- ✓ Change in activity or energy level, listlessness or difficulty moving
- ✓ Runny nose or eyes
- ✓ Drainage from open sore
- ✓ Skin changes such as a rash, swelling, bumps or redness
- ✓ Scratching, tugging at a part of the body or holding a body part



**LISTEN** – for complaints and unusual sounds from the child that might indicate they are not feeling well. Listen to what a parent shares about the child or other illness in the family.

- ✓ Continual crying or unusual fussiness
- ✓ Groans
- ✓ Wheezing, sneezing, labored breathing
- ✓ Hoarseness
- ✓ Coughing



**FEEL** – for a change in the skin that might indicate a fever or dehydration.

- ✓ Moistness
- ✓ Unusual warmth



**SMELL** – for unusual odors that might indicate an underlying disease.

- ✓ Fruity sweet breath
- ✓ Foul breath
- ✓ Unusual urine or bowel movement odors

### Daily Head to Toe Health Check

If the child has any of these symptoms, he/she may be ill.

- ✓ Shows a change in behavior or mood - less active, less energy, more sleepy, easily irritated
- ✓ Looks different from normal
- ✓ Complaints of not feeling well
- ✓ Has itchy skin or scalp
- ✓ Is pulling at ear
- ✓ Has draining from the eyes
- ✓ Has a runny nose
- ✓ Coughing severely
- ✓ Has skin rash or discoloration
- ✓ Has drainage from an open sore
- ✓ Has unusually warm skin
- ✓ Eating or drinking more or less than usual
- ✓ Is vomiting
- ✓ Has abnormal stools - gray or white bowel movement, diarrhea or unusual odor
- ✓ Is not urinating
- ✓ Is off balance or walks unevenly

**At the beginning of the day when the parent is still at the facility,** early educators and parents can decide together on a plan of action to support the child's health. If the child needs to be excluded from care the parent or guardian can leave with the child and tend to the child's health needs.

**If the child becomes ill during the day,** the early educator should notify the child's parent or guardian and decide together on how to care for the child. Children who are ill or contagious must be excluded from child care based on the NC Child Care Rules .0804 and .1720(b). Parents may need to consult the child's health care professional before a child can return to child care.

**Any time child maltreatment is suspected,** a report must be filed with the local Department of Social Services.



## Chequeo de salud diario

Revisado agosto de 2018



### ¿QUÉ ES?

El educador de temprana edad hace un control de salud diario observando a cada niño cuando entra al salón de clases y hablando brevemente con el padre, la madre o el tutor legal para ver si notan algo fuera de lo normal.

El chequeo de salud diario es una manera rápida de que los padres y los proveedores de cuidados infantiles observen los cambios de salud y el bienestar de un niño. El chequeo de salud diario permite a los proveedores de cuidados establecer lo que es normal y lo que es anormal en cada uno de los niños.

### ¿PARA QUÉ HACERLO?

Para determinar si el niño parece diferente o se comporta de manera diferente de lo habitual.

Mientras más pronto se detecten los niños enfermos, más pronto pueden atenderse sus necesidades de salud. La identificación oportuna de las enfermedades de los niños también puede reducir la propagación de tales enfermedades.

### ¿QUIÉN LO HACE?

Los proveedores de cuidados hacen el chequeo de salud diario de acuerdo a una lista de verificación. Los consultores de salud en el cuidado infantil pueden capacitar a los proveedores de cuidados para que hagan el chequeo de salud diario.

El proveedor de cuidados debe llevar a cabo el chequeo de salud diario de una manera cómoda y relajada que respete la cultura de la familia y también el cuerpo y los sentimientos del niño.

### ¿CUÁNDO DEBE HACERSE?

Los proveedores de cuidados infantiles deben llevar a cabo el chequeo de salud cuando el niño llega al establecimiento de cuidado infantil y mientras los padres / tutores estén presentes. Se puede repetir con regularidad durante el día según sea necesario.

### ¿CÓMO SE HACE?

Comience poniéndose a nivel de los ojos del niño. Luego:



**VEA** – si hay señales y síntomas de enfermedad

- ✓ Cambios en el estado de ánimo o el comportamiento
- ✓ Cambios en el nivel de actividad, languidez o dificultad para moverse
- ✓ Catarro, ojos llorosos, secreciones de llagas abiertas
- ✓ Cambios en la piel tales como sarpullido, hinchazón, bultos, enrojecimiento
- ✓ El niño se rasca, se jala o se sujeta una parte del cuerpo



**OGIA** – por quejas y los sonidos poco comunes que mita el niño y que pueden indicar que no se siente bien. Escuche lo que dice el padre o la madre sobre el niño y sobre otras enfermedades en la familia.

- ✓ Quejidos
- ✓ Llanto continuo o mañías poco comunes
- ✓ Jadeo, estornudos, dificultades de respiración
- ✓ Voz ronca
- ✓ Tos



**SIENTA** – al tacto los cambios en la piel

- ✓ Humedad
- ✓ Calidez poco común



**HUELA** – para detectar olores poco comunes que pueden indicar enfermedades subyacentes

- ✓ Aliento dulce y con olor a fruta
- ✓ Mal aliento
- ✓ Olores poco comunes en la orina o las heces

### CHEQUEO DE SALUD DIARIO DE LA CABEZA A LOS PIES

Si tiene alguno de estos síntomas, el niño puede estar enfermo.

- ✓ Muestra un cambio de comportamiento o estado de ánimo: menos activo, menos energético, más soñoliento, más irritable
- ✓ Se ve diferente de lo normal
- ✓ Se queja de que no se siente bien
- ✓ Le pica el cuero cabelludo o la piel
- ✓ Se jala la oreja
- ✓ Le salen secreciones por los ojos
- ✓ Tiene catarro
- ✓ Tose mucho
- ✓ Tiene sarpullido o decoloración de la piel
- ✓ Le salen secreciones de una llaga abierta
- ✓ Tiene la piel más caliente de lo normal
- ✓ Come o bebe más o menos de lo normal
- ✓ Vomita
- ✓ Las heces parecen anormales: heces blancas, heces grises, diarrea o heces con olores poco comunes
- ✓ No orina
- ✓ Pierde el equilibrio o camina tambaleándose



Al principio del día, cuando los padres/tutores todavía están en el establecimiento, los proveedores de cuidados pueden elaborar con los padres un plan de acción para la salud del niño. Si es necesario excluir al niño del establecimiento de cuidado infantil, los padres/tutores puede irse con el niño y atender sus necesidades de salud.

Si el niño se enferma durante el día, el proveedor de cuidados debe notificar a los padres / tutores del niño y decidir juntos cómo atenderlo. El niño enfermo o contagioso debe de ser excluido del establecimiento de cuidado infantil según las Reglas de Cuidado Infantil de Carolina del Norte .0804 y .1720(b). Es posible que los padres tengan que consultar un profesional médico del niño antes de que el niño pueda volver al establecimiento de cuidado infantil.

Cada vez que se sospeche desatención o abuso del niño se debe presentar un informe a la Departamento de Servicios Sociales (Local Department of Social Services).



# Thermometer Guidance

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## **Safe temperature checks during drop-off:**

- Use a touchless thermometer if one is available.
- Ask parents/guardians to bring a thermometer from home to check their own child's temperature at drop off.

## **If using the facility's thermometer:**

- Hand the thermometer to the parent or staff to take their child's temperature
- Use disposable thermometer covers that are changed between individuals
- Clean and sanitize the thermometer between uses if disposable covers are not available
- Wash hands or use hand sanitizer between direct contact with individuals

**Do not take oral (under the tongue) temperatures using a shared thermometer.**



# Exclusion Criteria

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- Follow Interim Coronavirus Disease 2019 Guidance for Child Care Settings and consider the standard exclusion criteria for illness
- Recommend exclusion of children or staff who are considered high-risk
  - People aged 65 years and older
  - People with high-risk conditions:
    - chronic lung disease or moderate to severe asthma
    - heart disease with complications
    - immunocompromised including undergoing cancer treatment
    - obesity
    - underlying medical conditions, particularly if not well controlled, such as those with diabetes, renal failure, or liver disease
- Women who are pregnant are known to be at risk with severe viral illness, however, to date data on COVID-19 has not shown increased risk



# Preventing spread in the classroom


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- Social distancing strategies
  - Small groups of children with the same provider
  - Stagger outdoor learning times
  - Increased spacing during nap time
- Avoid touching eyes, nose, and mouth
- Cover coughs and sneezes with a tissue
- Provide supplies including handwashing stations with soap and water, paper towels, and lined trash cans
- Monitoring for mouthed toys
- **Family Style Dining – NO**
- **Water Play – NO**





# Handwashing



## Washing Your Hands

Revised August 2018



**1. Turn on warm water.**  
Be sure clean, disposable paper towels are available.  
Water should be 80-110° F in NC.



**2. Wet hands with water.**




**3. Apply liquid soap.**



**4. Wash for at least 20 seconds.**  
Rub top and inside of hands, under nails and between fingers.




**5. Rinse hands.**  
Rinse hands under running water for at least 10 seconds.



**6. Dry hands.**  
Dry hands with clean, disposable paper towel.



**7. Turn water off with paper towel.**  
Without re-contaminating hands.



**8. Throw paper towel away.**  
Dispose in a plastic-lined trash container.

**Teach children to wash their hands:**

- Upon arrival 
- Before and after eating 
- Before and after water play
- After using the toilet/diapering 
- After coughing or contact with body fluids
- After messy play
- After outside play
- After handling animals 
- After touching contaminated surfaces 
- Whenever hands are visibly dirty
- Before going home

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NC Sanitation Rule 15A NCAC 18A .2803 (b), 2815 (e), Caring for Our Children, 3rd Edition 3.2.2.1, 3.2.2.2  
Posters developed in cooperation with the NC Division of Child Development and Early Education

THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES Division of Child Development and Early Education



## Lavado de Manos

Revisado agosto 2018




**1. Abra la llave de agua caliente.**  
Asegúrese de que haya toallas de papel limpias.  
El agua debe estar entre 80 y 110° F en NC.



**2. Mójese las manos con agua.**



**3. Aplíquese jabón líquido.**




**4. Lávese las manos por 20 segundos.**  
Frote la parte de arriba y la parte de adentro de las manos, debajo de las uñas y entre los dedos.



**5. Enjuáguese las manos.**  
Enjuáguese las manos bajo el agua por lo menos 10 segundos.



**6. Séquese las manos.**  
Séquese las manos con una toalla de papel limpia.




**7. Cierre la llave de agua.**  
Cierre la llave de agua usando la toalla de papel.



**8. Deseche la toalla de papel.**  
Desechéla en un recipiente de basura con revestimiento de plástico.

**Enseñe a los niños a lavarse las manos:**

- Al llegar 
- Antes y después de comer 
- Antes y después de usar las mesas de agua
- Después de ir al baño o de que se les cambian los pañales
- Después de toser o tocar líquidos corporales
- Después de ensuciarse jugando
- Después de jugar afuera 
- Después de tocar animales domésticos
- Cuando sea que las manos se vean claramente sucias 
- Antes de irse a la casa

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# Cleaning Guidance

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- Follow regular cleaning protocols and use an EPA-registered disinfectant that is active against coronaviruses. Clean and disinfect frequently touched surfaces throughout the day and at night.
- Clean and sanitize all toys at the end of the day.
- Remove soft toys that cannot be easily cleaned during the coronavirus outbreak.
- Wash linens more often
- Playground equipment



# When someone becomes sick during the day

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## Children

- While waiting for a sick child to be picked up, caregivers should stay with the child in a room isolated from others.
- If the child has symptoms of COVID-19 (fever, cough, shortness of breath), the caregiver should try to maintain a distance as far as safely possible from the child (preferably, 6 feet).

## Staff

- Staff should leave the facility or as soon as it is safe to do so.
- Ensure that the facility has flexible sick leave and absentee policies that do not encourage people to come in while sick.



# Notifying Families

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At what point should families be notified of illness in the facility?



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# Take care of yourself

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- Take care of yourself so you can take care of others
- Be mindful and get plenty of rest, healthy diet, and moderate exercise such as walking
- Spend time winding down. Try to do some other activities you enjoy.
- Connect with others. Talk with people you trust about your concerns and how you are feeling.







# Take care of children

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- Provide reassurance
- Maintain consistent routines
- Help children with self-regulation



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# ITS SIDS Training

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## COVID Flexibility in Policy and Regulatory Requirements, Training Requirements:

Provide an additional six months for administrators and any child care provider to complete CPR, FA and ITS SIDS training. This change is allowed as long as one child care provider who has completed the CPR, FA training is present while children are in care, and as long as one child care provider in the infant room who has completed the ITS-SIDS training is present while infants are in care. 10A NCAC 09 .1102

Trainers should be aware of Safe Sleep Rule Changes October 2017 and the current sample policies available in English and Spanish.



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# Thank you!

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